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APPLICANTS

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** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/US00/18750 07/07/2000
WHICH IS A CON OF 09/349,290 07/07/1999
WHICH IS A CIP OF 09/173,189 10/14/1998 PAT 6,271,351
WHICH IS A CIP OF 08/974,658 11/19/1997 ABN
WHICH IS A CON OF 08/471,583 06/07/1995 PAT 5,691,452
WHICH IS A CIP OF 08/458,916 06/02/1995 PAT 5,840,852
WHICH IS A CON OF 08/409,337 03/23/1995 PAT 5,854,209
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** FOREIGN APPLICATIONS *****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

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TITLE

Preserving a hemoglobin blood substitute with a transparent overwrap

FILING FEE RECEIVED 1164	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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